

# POLICY INFORMATION

Policy Title: Fax Policy and Procedure

Departmental Owner: Chief Compliance, Audit, and Privacy Officer

Version Effective Date: 2/28/24

#### Last Reviewed: 2/28/24

### SCOPE

This policy applies to the following individuals and/or groups: ⊠ All of the below categories

All Employees CT Employees NY Employees Remote Employees Contractors Volunteers Students/Interns Vendors

This policy applies to all above listed Nuvance Health workforce members including but not limited to the following locations:

$\Box$ All of the below entities		
Nuvance Health Systems		
Danbury Hospital (including New Milford Hospital Campus)	⊠ Health Quest Systems, Inc. "(HQSI)"	U Western Connecticut Home Care, Inc ("WCHN")
⊠Northern Dutchess Hospital	🛛 Health Quest Home Care, Inc	Western Connecticut Health Network Physician Hospital Organization ACO, Inc.
□Norwalk Hospital	☑ Hudson Valley Cardiovascular Practice, P.C. (aka The Heart Center) ("HVCP")	$\Box$ Western Connecticut Home Care, Inc
🖂 Putnam Hospital	🛛 Other HQSI-affiliated Entities Not Listed	$\Box$ Other WCHN-affiliated Entities Not Listed
⊠Sharon Hospital		⊠Nuvance Health Medical Practices (NHMP PC, NHMP CT, ENYMS & HVCP)
Naccar Brothors Modical Contor		

 $\boxtimes$  Vassar Brothers Medical Center

## POLICY STATEMENT/PURPOSE

To safeguard and protect the privacy of Protected Health Information ("PHI") through administrative, technical and physical safeguards. Facsimile ("fax") machines provide a useful mechanism for rapid and cost-effective communication when transmission of information is time sensitive and cannot be delivered by regular mail or in an encrypted email. However, all attempts to obtain this information via the Nuvance Health and its affiliates ("Nuvance") Information Systems should be exhausted prior to faxing. The transmission of PHI by fax poses significant privacy risks associated with misdirected faxes or the delivery of faxes to machines in unsecured locations. The purpose of this policy and corresponding procedure is to establish the process to preserve the privacy and security of PHI transmitted to or from Nuvance and its affiliates by fax.

## DEFINITIONS

See HIPAA Glossary

**Covered Individual:** This term refers to all Nuvance Health workforce members, business affiliates, and agents. Workforce members shall include any of the following individuals at Nuvance Health: Members of the Nuvance Health Board and the boards of any Nuvance Health related entity; President/Chief Executive Officer; administrators; managers, officers; employees, affiliates; medical staff members; appointees; volunteers; personnel; interns; students, trainees, and any individual whose conduct is under direct control of Nuvance Health whether or not they are paid by Nuvance

Original Effective Date: LHQ= 8/6/09 Revision Dates: 2/28/24 Supercedes: HQ 5.2.19 Fax Policy; HQ 5.2.19 Fax Procedure



Health. Business Affiliates shall include any non-workforce member, contractor, independent contractor, vendor, person, subcontractor or third-party, who or that, in acting on behalf of Nuvance Health: (i) delivers, furnishes, prescribes, directs, orders, authorizes, or otherwise provides Federal healthcare program items and services; (ii) performs billing or coding functions; (iii) contributes to Nuvance Health's entitlement to payment under Federal healthcare programs; and (iv) is affected by one or more of Nuvance Health's risk areas through the Business Affiliate's interaction with, or performance of their role, functions, and responsibilities or provision of contracted services at Nuvance Health. Agents include individuals or entities that have entered into an agency relationship with Nuvance Health. Agents fall under the category of either Workforce Member or Business Affiliate depending on their role, functions, and responsibilities.

# POLICY

Nuvance Covered Individuals shall use additional precautions to protect the confidentiality of PHI when transmitting or receiving it by fax.

## PROCEDURE

Nuvance has a fax process in place that allows for this method of transmission of PHI as long as specified safeguards are in place to ensure confidentiality and protection of the information.

# A. SENDING FAXES

Nuvance Covered Individuals shall transmit PHI by fax only when the transmission is time-sensitive and when immediate patient care would be affected. Covered Individuals must take reasonable steps to ensure that a fax transmission is sent to and received by the intended recipient. When the fax transmission includes PHI, "reasonable steps" include, but are not limited to, the following:

- 1. Confirm the fax number with the intended recipient. Verify all fax numbers provided by patients, physicians, or other third parties before transmitting a fax.
- 2. Confirm with the intended recipient that the receiving fax machine is located in a secure area or that the intended recipient is waiting by the fax machine to receive the transmission.
- 3. Confirm the fax machine is programmed to print both a confirmation page upon completed transmission, as well as a notification should the fax not be successfully transmitted. This will enable the sender to determine if the fax was sent and received in its entirety.
- 4. Fax machines will be pre-programmed with the fax numbers of those recipients to whom patient information is frequently sent in order to minimize errors. Pre-programmed fax numbers will be tested frequently to confirm they are still valid.
- 5. When a fax number is entered manually (because it is not one of the preprogrammed numbers) the sender entering the number will visually check the recipient's fax number on the fax machine prior to starting the transmission.
- 6. Covered Individuals must use a Nuvance standard fax cover sheet, which is found on The Hub, that contains the following statement:

**Confidential under NYS Public Health Law 2805-M and/or Education Law 6527(3)** The document(s) accompanying this fax may contain confidential information. It is intended only for the use of the individual to whom it is addressed and may contain information



that is privileged and confidential. Federal and State Law prohibit the use or re-disclosure of this information by anyone other than the person listed above.

If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this telecopied information, except its direct delivery to the intended recipient named above, is strictly prohibited. If you have received this fax in error, please notify us immediately at the telephone number listed above to arrange for the return of the documents to us.

- 7. The name, business affiliation, department, telephone number and fax number of the intended recipient and the sender, as well as the number of pages contained in the transmission, along with a detailed listing of information contained should be entered on the cover sheet.
- 8. If the requestor has requested information for more than one patient, a separate fax transmission complete with its own Nuvance standard fax cover sheet, shall be sent for each patient's information. As an example, Dr. Smith requests records to be faxed for patient Mary Jones and Joe Johnson. One fax transmission, with a completed cover sheet, will be sent to Dr. Smith for patient Mary Jones and a second fax transmission, with a completed cover sheet, will be sent to Dr. Smith for patient Joe Johnson.
- 9. Fax confirmation sheets will be checked immediately or as soon as possible after the fax has been transmitted, to confirm the material was faxed to the intended fax number and that the correct number of pages was transmitted. If the intended recipient notifies the sender that the fax was not received, the sender will use best efforts to determine whether the fax was inadvertently transmitted to another fax number by checking the fax confirmation sheet and/or the fax machine's internal logging system.
- 10. If a Covered Individual becomes aware that a fax was sent to the wrong fax number, the individual shall immediately attempt to contact the recipient by fax or telephone and request that the faxed documents, and any copies of them, be immediately returned to the Nuvance affiliate or destroyed. The covered individual's supervisor and Privacy Officer or designee will also be notified of the misdirected fax.
- 11. Those recipients who regularly receive patient information via fax will be periodically reminded to notify the Nuvance affiliate of any change to the recipient's fax number.
- 12. If faxed from the Health Information Management Department ("HIM") the fax cover sheet and confirmation sheets will be attached to the faxed documents and maintained. If faxed from outside of the HIM, the department is to maintain a record which includes the fax cover sheet and confirmation. Information sent directly from an electronic/computer system that maintains an internal log of all faxes sent is not required to be printed and maintained.
- 13. Covered Individuals who routinely send faxes containing patient information to other individuals or organizations will promptly advise those entities of any changes to their fax number.
- 14. Sensitive Protective Health Information such as HIV/AIDS results, substance abuse and mental health treatment records should not be sent by fax, if possible.
- 15. When faxing patient information, Covered Individuals must comply with all other Nuvance privacy policies.

# **B. RECEIVING FAXES**

Covered Individuals who are intended recipients of faxes that contain patient information shall take reasonable steps to minimize the possibility those faxes are viewed or received by someone else. These "reasonable steps" include, but are not limited to, the following:



- Fax machines that receive faxes that include PHI must be located in Secure Areas defined as a location that is not accessible to the general public. If an Covered Individual receives a fax containing PHI on a fax machine that is not in a Secure Area, the recipient of the fax will promptly advise the sender that the receiving fax machine should not be used for the transmission of such information.
- 2. Fax machines will be checked on a regular basis to minimize the amount of time incoming faxes that contain PHI are left on the machines. Covered Individuals who monitor the fax machines, or those who sees such a fax on the machine, will promptly remove incoming faxes and deliver them to the proper person.
- 3. If a Covered Individual receives a fax addressed to someone other than themselves and the person to whom the fax is addressed is someone at Nuvance, the recipient shall promptly notify the individual to whom the fax was addressed and deliver or make arrangements to deliver the misdirected fax as directed by the sender.
- 4. All faxes received must be confirmed to have been transmitted to the proper recipient and that all pages have been received. If there is no cover sheet or the number of pages sent is not indicated, the recipient must call the sender to verify that the correct and complete information has been received.
- 5. If a Covered Individual receives a fax addressed to someone other than themselves and the person to whom the fax is addressed is NOT affiliated with Nuvance, the recipient will promptly notify the sender and destroy or return the faxed material as directed by the sender.
- 6. Covered Individuals who receive faxes that contain Sensitive Protected Health Information (such as HIV/AIDS results or status or substance abuse and mental health treatment records) will promptly advise the senders of such faxes that it is the policy of Nuvance not to accept transmissions of Sensitive Protected Health Information by fax.
- 7. Connecticut ("CT") Law requires that the information that is breached or misdirected be unrecognizable/unreadable prior to its destruction no matter the format.

# ENFORCEMENT

All individuals whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy and related procedure may result in remedial and/or disciplinary action, up to and including termination of any employment or other relationship.

# REFERENCES

45 CFR§164.508 Uses and Disclosures 45 CFR§164.530(c) Safeguards Connecticut State Law: Senate Bill 949 - Act Improving Data Security and Agency Effectiveness

# APPROVAL

DocuSigned by: Jared B Gaynor 6D04982F5DB24D1.

2/28/2024

Signature

Date